## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
John Bolton Super PAC	C C00542464
	G C000342404
Check if 24-hour report X 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Campaign Solutions	09 18 2014
Mailing Address 117 N. Saint Asaph Street	Amount
City State Zip Code	485.04
Alexandria VA 22314	Transaction ID : SE.18115 Date of Disbursement or Obligation
Purpose of Expenditure voter contact Category/ Type	09 19 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Thomas Cotton Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought  Disbut 271225.04	ursement For: Primary ⊠ General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
CD, Inc.	09 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P. O. Box 1877	Amount
City State Zip Code	258240.00
Alexandria VA 22313	Transaction ID : SE.18116
Purpose of Expenditure  Category/	Date of Disbursement or Obligation
media placement  Type	09 19 2014
	e Sought: House District:
Thomas Cotton Oppose	President Senate State: AR
Calendar Year-To-Date Per Election for Office Sought  Disbrace 270740.00	ursement For:  Primary
(a) OUDTOTAL of the circuit and bedress advent Francisch to consider	050705 04
(a) SUBTOTAL of Itemized Independent Expenditures	258725.04
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 410	09 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
John Bolton Super PAC	
	C C00542464
Check if 24-hour report X 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Harbinger, LLC	M M / D D / Y Y Y Y
Mailing Address 1919 M Street, N.W., #200	09 19 2014 Amount
City State Zip Code	12500.00
Washington DC 20036	Transaction ID : SE.18117 Date of Disbursement or Obligation
Purpose of Expenditure media production Category/ Type	09 16 / Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:
Thomas Cotton Oppose	President State: AR
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For: Primary X General  Other (specify) ▶
Full Name of Payer	
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	12500.00
	4 4 4
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	271225.04
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	09 19 2014
Signature	